

FILED
U.S. DISTRICT COURT
EASTERN DISTRICT OF TEXAS

**IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF TEXAS 22 2006
TYLER DIVISION**

Form To Be Used By A Prisoner in Filing a Complaint DAVID J. MALAND, CLERK
Under the Civil Rights Act, 42 U.S.C. § 1983 BY DEPUTY

Arthur Carson, #517349

Plaintiff's name and ID Number

Michael Unit-TDCJ-CID

Place of Confinement

CASE NO:

606CV559

(Clerk will assign the number)

v.

Dianne Johnson (PA), and

Defendant's name and address

V.Buchanan (PA), Michael Unit

Defendant's name and address

UTMB-Michael Unit/Galveston,

Defendant's name and address

(DO NOT USE "ET AL.")

INSTRUCTIONS - READ CAREFULLY

NOTICE:

Your complaint is subject to dismissal unless it conforms to these instructions and this form.

1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
2. Your complaint must be legibly handwritten in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, **DO NOT USE THE REVERSE SIDE OR BACK SIDE OF ANY PAGE.** ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
4. When these forms are completed, mail the original and one copy to the Clerk of the United States Court for the appropriate District of Texas in the Division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. The list labeled as "VENUE LIST" is posted in your unit law library. It is a list of Texas prison units indicating the appropriate District Court, the Division and an address of the Divisional Clerks.

FILING FEE AND IN FORMA PAUPERIS

1. In order for your complaint to be filed, it must be accompanied by the filing fee of \$350.00.
2. If you do not have the necessary funds to pay the filing fee in full at this time, you may request permission to proceed *in forma pauperis*. In this event you must complete the application to proceed *in forma pauperis* (IFP), setting forth the information to establish your inability to prepay the fees and costs or give security therefore. You must also include a six (6) month history of your Inmate Trust Account. You can acquire the application to proceed IFP and appropriate Inmate Account Certificate from the law library at your prison unit.
3. 28 U.S.C. 1915, as amended by the Prison Litigation Reform Act of 1995 (PLRA), provides, "...if a prisoner brings a civil action or files and appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." Thus, the Court is required to assess and, when funds exist, collect, the entire filing fee or an initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the Court will apply 28 U.S.C. 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from your Inmate Account, until the entire \$350 filing fee has been paid.
4. If you intend to seek *in forma pauperis* status, then do not send your complaint without an Application to Proceed IFP, and the Certificate of Inmate Trust Account. Complete all the essential paperwork before submitting it to the Court.

CHANGE OF ADDRESS

It is your responsibility to inform the Court of any change of address and its effective date. Such notice should be marked "**NOTICE TO THE COURT OF CHANGE OF ADDRESS**" and shall not include any motions(s) for any other relief. Failure to file a NOTICE TO THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedures.

I. PREVIOUS LAWSUITS:

- A. Have you filed any other lawsuits in the state or federal court relating to imprisonment? x YES _____ NO _____
- B. If your answer to "A" is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, giving the same information.)
 1. Approximate date of filing lawsuit: see attached appendix-(A)
 2. Parties to previous lawsuit:
Plaintiff(s): _____
 - Defendant(s): _____
 - Court (If federal, name the district; if state, name the county) _____
 - Docket Number: _____
 - Name of judge to whom case was assigned: _____
 - Disposition: (Was the case dismissed, appealed, still pending?)

 - Approximate date of disposition: _____

II. PLACE OF PRESENT CONFINEMENT: Michael Unit-P.O.Box 4500,Tennessee Colony

III. EXHAUSTION OF GRIEVANCE PROCEDURES:

Have you exhausted both steps of the grievance procedure in this institution? X YES _____ NO

Attach a copy of the Step 2 grievance with the response supplied by the prison system.

IV. PARTIES TO THE SUIT:

A. Name of address of plaintiff: Arthur Carson,P.O.Box 4500,Tennessee Colony,Tx.-75886

B. Full name of each defendant, his official position, his place of employment, and his full mailing address.

Defendant #1: Dianne Johnson,Physician Asst.Micheal Unit
P.O.Box 4500,Tenn.C colony,Tx.75886

Briefly describe the act(s) or omission(s) of this defendant, which you claimed harmed you.
Unauthorize deletion of Medical Records from Computer

Defendant #2: Virginia Buchanan,Physician Asst.(Employee # 112054)
Michael Unit,PO.Box 4500,Tenn,Colony,Tx.75886

Briefly describe the act(s) or omission(s) of this defendant, which you claimed harmed you.
Indifferent to Health,& concealment of Medical Information on Drugs

Defendant #3: UTMB-Micheal Unit Branch/Galveston Branch
301 University Blvd., Galveston,Tx.77555-1067

Briefly describe the act(s) or omission(s) of this defendant, which you claimed harmed you.
Failure to establish or enforce HCV Treatment Protocol/Indifference

Defendant #4: B.Young,Coffield Classification Chief
Rt.1 Box 150,Tennessee Colony,Tx.75884

Briefly describe the act(s) or omission(s) of this defendant, which you claimed harmed you.
After numerous Complaints from Plaintiff as Retaliation,transferred
Larry Leflore,State Classification Chief

Defendant #5: Administrative Bldg.,P.O.Box 99,Huntsville,Tx.77342

Briefly describe the act(s) or omission(s) of this defendant, which you claimed harmed you.
Retaliation, and Failure to Supervise Agency Wide Issues & Court Order
Enforcements.

Defendant# 6:G.Karriker,Michael Unit Classification Chief,
P.O.Box 4500,Tennessee Colony,Tx.75886.
Indifferent to Medical Restrictions

V. STATEMENT OF CLAIM:

State here in a short and plain statement the facts of your case, that is, what happened, where did it happen, when did it happen, and who was involved. Describe how each defendant is involved. You need not give any legal argument or cite any cases of statutes. If you intent to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember that the complaint must be stated briefly and concisely. IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE YOUR COMPLAINT.

See pages attached Statement of Claim(s) as pages 4a, etc.,

VI. RELIEF: State briefly exactly what you want the court to do for you. Make no legal arguments. Cite not cases or statutes.

Cease and desist assignment on the Michael Unit; Jury Trial;
Declaratory and Injunctive Relief Authorizing Meaningfull Medical-
Treatment, Full disclosure of Drug Treatment; Punitive, Compensatory Damage

VII. GENERAL BACKGROUND INFORMATION:

- A. State, in complete form, all names you have ever used or been known by including any and all aliases:
None
-
- B. List all TDCJ-ID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you, if know to you.

287731-TDCJ; 12808-077-Federal Bureau of Prison

VIII. SANCTIONS:

- A. Have you been sanctioned by any court as a result of any lawsuit you have filed? YES NO
- B. If your answer is "yes", give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)
1. Court that imposed sanctions (If federal, give district and division): U.S. Eastern-Texarkana
 2. Case Number: see appendix-(A)
 3. Approximate date sanctions were imposed: 11 11 11 11
 4. Have the sanctions been lifted or otherwise satisfied? YES NO

STATEMENT OF CLAIM(S):

The Michael Unit Health Care Providers, and Galveston Branch of The University of Texas Medical Branch, "UTMB", in concerted action with Prison Officials, have implemented a Elaborated scheme of Retaliation because of a Previous Settlement Agreement, My use of the Grievance Apparatus, where Defendants refuse to Treat a carcinogenic infection that will not heal under My eye, or refer Me to a Dermatologist, or conduct a Biopsy, (Unit GR.#2007010741); Defendants have refused to provide anything For Back-pain, Headaches and Dizziness, and have made Me susceptible to Heighten Liver Damage/Failure or Death with their refusal to treat My Hepatitis-C, "HCV", conduct a liver biopsy to establish a baseline stage of this Disease or give Me Counseling, (UNIT GR. STEP 1, 2, #2006029449).

In defiance of a Compromise Settlement Agreement, I have been assigned to the Michael Unit twice since the Agreement, see (Plaintiff's Exhibit One- Settlement Agreement, Carson Vs. Estelle, # TY-79-356-CA, U.S. Eastern District-Tyler). each time I am placed on the Michael Unit I have been subjected to Gross Medical Indifferences. I have a bulding back disc; Hearing Impairment; HCV; Hypertension, that Have degenerated with My Age, and without any corrected measures taken, the previous Medical, and Housing Restrictions Doctors imposed were arbitrarily taken by a Physician Assistant, despite My Medical History, and previous Expert Medical Opinions the past eighteen Years of My Confinement. where Immediately after being Reassigned on the Michael Unit, Dianne Johnson, (PA) without Examination, Doctor's Authorization, or Discontinuation Order by a Doctor when My Medical Restrictions and other files were deleted from UTMB'S Computer. this Gross Misuse of this Compuer set into motion events

STATEMENT OF CLAIM(S) CONTINUE:

She knew would have harmful effects on Me, where immediately My bottom Bunk Restriction was taken, requiring that I climb a top bunk, which causes excruciating pain in My Lower back. when I could no longer tolerate the pain, and refused to climb up a bunk that was five feet from the floor, without any steps or handrails, Disciplinary sanctions were imposed, see (Discip. Case #2006317054, and Hearing tapes NOS.326, side-A; tape #168-side-A).

UTMB-Galveston, refused to Supervise its Physician Assistants and allowed them to run amok. these acts of Omissions have allowed Dianne Johnson, and V.Buchanan perform ultra vires as Doctors, by over-Riding previous Opinions from Doctors. UTMB's tacit approval of Physician Assistant's making Medical diagnosis detrimental to Prisoners are Deliberately indifferent to My Medical Needs, see attached, (Plaintiff's Exhibit-Two) "UTMB'S RESPONSE To My Compliant".

Only when the Settlement Agreement Court became involved was I Transferred from the Michael Unit on May, 31, 2006. thus, after being examined by Coffield Unit Medical Care Providers, all Medical Restrictions was restored that were deleted by Dianne Johnson of the Michael Unit, (Unit Gr.#2006196636). within a Four Months period, I filed sixteen Grievances on the Coffield Unit, six against Classification, (Unit Gr.NOS.2006177135; 200620271; 2006211468; 20067001867; 2007022362; 2006211408) as Retaliation, I was returned to the Michael Unit October 13, 2006. this Retaliatory Transfer impeded My pending interview with Officials from Atrium for My placement in the Prison Incentive Enhancement Program. upon My return to Michael Unit, V.Buchanan, again deleted My medical Restrictions without any Physical examination.

STATEMENT OF CLAIMS CONTINUE:

To conceal this fact, On November 7, 2006, Virginia Buchanan, as a Pretext, conducted a fake Medical Examination to validate Her Previous elimination of My Medical Restrictions. This Examination was uncalled for since the Examination of July 5, 2006, was My annual Examination, Buchanan's duplicitous Annual Exam was contrarwise of that where My Medical Restrictions were Restored. Buchanan, advised Me that My Liver Enzyme Level Count was at Seventy-Four (74), and said to be at a "Critical or Dangerous Level", [sic]. However, Buchanan Refused to provide any Treatment to prevent liver damage, or provide Milk-Thistle Supplements. Buchanan, also refused to treat or provide Me anything for Headaches, Dizziness. Buchanan, without Conferring with a Doctor, Imposed an additional Hypertension Drug, (Hydrochlorothiazide, 25 mg) and further refused to provide at My request information regarding this Drugs Dangers and Side effects, or its simultaneous toxic Cocktail on My liver with My other Medications, i.e., "Diltiazem, 480 mg; Enalpril, 20 mg; Aspirin, 325".

Defendant Buchanan's lack of HCV Expertise, and refusal to refer Me to a HCV Expert are the Proximate Cause of My injuries, where UTMB, and Buchanan's indifference to My Health will have caused progressive deterioration, Cirrhosis or endstage Liver disease(s). through these actions or inactions, constitute a method to Pharmaceutically induce or hasten chronic liver and Kidney problems, without providing adequate information, and access to

STATEMENT OF CLAIMS CONTINUE:

Appropriate Examination from Neurologist regarding My Headaches and Dizziness, and Gastroenterologist for HCV. currently, the Defendants have failed to provide the Prevailing Standard of Care in Treatment for My HCV, with interferon or Ribavirin Treatment to prevent a chronic Viral Liver disease; Liver Cancer; Liver inflammation and scarring, that ultimately can lead to Liver failure and Death.

UTMB, and Defendant Buchanan, in their failure to ensure that a consistent, Appropriate, effective and efficient Approach to Clinical Management of Inmates with HCV, have not Instituted a Program to end the subjective Mix bag of treatment by Physician Assistant's, whom have no Protocol, is Reckless.

The Totality of Defendants Actions, and Reprisals have subjected Me to Punitive sanctions, Housing and Job Assignments that are contraindicated to My Health, where I am given Disciplinary infraction because I cannot climb Top bunks, see attached, (Plaintiff's Exhibit three, Four, and Five-i.e., "two Disciplinary Infractions; Request to Dr. Thompson, Answered by an RN").

The Michael Unit Medical Providers, and Classification, have acted contrary to My Medical History, and Settlement Agreement, solely to Harm Me.

Larry LeFlore, State Classification Director's refusal to properly Supervise His Subordinate Committee's, and Veto their recommendation to return Me to the Michael Unit. where His Office, the Central Administrative Committee that makes the final decision regarding Unit Transfers. as of June 2, 2006, Larry LeFlore, knew of the Settlement Agreement's provisions, His failure to Act, has allowed the Wanton Infliction of pain against Me.

C. Has any court ever warned or notified you that sanctions could be imposed? YES NO

D. If your answer is "yes", give the following information for every lawsuit in which warning was imposed.
(If more than one, use another piece of paper and answer the same questions.)

1. Court that imposed warning (if federal, give the district and division): _____
2. Case number: _____
3. Approximate date warning were imposed: Unknown

Executed on: 11th DAY OF Dec. 06.
(Date)

Arthur W. Carson

(Printed Name)

Arthur W. Carson

(Signature of Plaintiff)

PLAINTIFF'S DECLARATIONS

1. I declare under penalty of perjury all facts presented in this complaint and attachment thereto are true and correct.
2. I understand if I am released or transferred, it is my responsibility to keep the Court informed of my current mailing address and failure to do so may result in the dismissal of this lawsuit.
3. I understand that I must exhaust all available administrative remedies prior to filing this lawsuit.
4. I understand I am prohibited from bringing an *in forma pauperis* lawsuit if I have brought three or more civil actions in a Court of the United States while incarcerated or detained in any facility, which lawsuits are dismissed on the ground they were frivolous, malicious, or failed to state a claim upon which relief may be granted, unless I am under imminent danger or serious physical injury.
5. I understand even if I am allowed to proceed without prepayment of costs, I am responsible for the entire \$350 filing fee and costs assess by the Court, which shall be deducted in accordance with the law from the inmate account by my custodian until the filing fee is paid.

Signed this 11th day of Dec., 2006.
(Day) (Month) (Year)

Arthur W. Carson

(Printed Name)

Arthur W. Carson

(Signature of Plaintiff)

WARNING: The Plaintiff is hereby advised any false or deliberately misleading information provided in response to the following questions will result in the imposition of sanctions. The sanctions the Court may impose include, but are not limited to monetary sanctions and/or the dismissal of this action with prejudice.